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	SECURITIE		HANGE COM	MISSION		Expires: Estimated a	warana hur	April 30, 2008
	W YOU	Vashington	D.C. 20549		i			16.00
	RECEIVED COM	FOR	M D		_ I			
13/	QITONIO COL	E OF SALE	OF SECURIT	'IES	ļ		SEC USE O	NLY
// 5	ICT 1 8 COUL BORS	SUANT TO I	REGULATION	D,		Prefix		Serial
	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	SECTION 4(6), AND/OR				l	1
N. S.	UNIFORM 209	LIMITED OF	FERING EXE	MPTION		D	ATE RECEI	VED
	6 503/3						I	1
-	(check if this is an amend		=	licate change.)				
Voting, Redeemable 9	Shares in Aristos Capital C	Offshore Fund Lte	d				 	
Filing Under (Check bo	x(es) that apply):	☐ Rule 504	☐ Rule 505	Rule 506	□ se	ection 4(6)	ULOE	
Type of Filing:	New Filing				4			
		A BASIC	DENTIFICATION	ON DATA		1106111 111111111		ALTILIKATLILI —
			JIDENTIII IQATI					AIKIKKKKI —
	ion requested about the issu						IN CANDI DAN CERNICE	40 MADI 1101 MAI — —
	check if this is an amend	lment and name h	as changed, and ind	cate change.		0	7080711	I
Aristos Capital Offsho	ore Fund Ltd.							
Address of Executive C	Offices		(Number and Street	. City, State, Zip	Code) T	elephone Nur	nber (Includ	ing Area Code)
	ervices (Cayman) Limited,	Queensgate Hor	•		,		· · · · · · · · · · · · · · · · · · ·	g ,
Cayman, Cayman İsla	nds							
Address of Principal Of	fices c/o Aristos Capital, L	LLC, c/o Pilosoft	(Number and Street	, City, State, Zip	Code) T	elephone Nur	nber (Includ	ing Area Code)
(if different from Execu-	tive Offices) 55 Broad	Street, New York	G NY 10004					'ECOED
Brief Description of Bus	siness: private invest	ment company				2	THOU	につってし
						<u> </u>	OCT 1	E 0000
Type of Business Orga	nization						001 &	3 Sm/
	corporation	limited p	artnership, already f	ormed	⊠ oth	er (please spe	city)THON	MSOM
	business trust	☐ limited p	artnership, to be for	ned		Islands exem		
			Month	Y	ear			1 XX
Actual or Estimated Da	te of Incorporation or Organ	ization:				☑ Actu	ıal 🗆] Estimated
Jurisdiction of Incorpor	ation or Organization: (Ente	er two-letter U.S. F	ostal Service Abbrev	viation for State;				
		CI	N for Canada; FN for	other foreign juri	sdiction)	F	N	
GENERAL INSTRUCT Federal:	IONS							
Who Must File: All iss U.S.C. 77d(6).	uers making an offering of	securities in relia	nce on an exemption	under Regulatio	on D or Sec	ction 4(6), 17	CFR 230.50)1 et seq. or 15

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are

SEC 1972 (5-05)

	not required	to respond unless the for	m displays a currently va	ilid OMB control r	number.
		A. BASIC ID	ENTIFICATION DAT	A	
Each beneficial ownEach executive office	ne issuer, if the iss ner having the pov cer and director of	uer has been organized with	ect the vote or disposition of		a class of equity securities of the issuer; rtnership issuers; and
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual):	Aristos Capital Manag	gement LLC (Investment	Manager)	
Business or Residence Add	ress (Number and	Street, City, State, Zip Code	e): c/o Pilosoft, Inc. 55	Broad Street, Nev	v York, NY 10004
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual):	Woodard, Nelson P., I	Ph. D.		
Business or Residence Add 10004	ress (Number and	Street, City, State, Zip Code	e): c/o Aristos Capital,	LLC, c/o Pilosoft,	Inc., 55 Broad Street, New York, NY
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual):	Shimunov, Lenny B.			
Business or Residence Add 10004	ress (Number and	Street, City, State, Zip Code	e): c/o Aristos Capital,	LLC, c/o Pilosoft,	Inc., 55 Broad Street, New York, NY
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		☐ Director	General and/or Managing Partner
Full Name (Last name first,	if individual):	Peng, Jeffrey K.			
Business or Residence Add 10004	ress (Number and	Street, City, State, Zip Code	e): c/o Aristos Capital,	LLC, c/o Pilosoft,	Inc., 55 Broad Street, New York, NY
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		☐ Director	General and/or Managing Partner
Full Name (Last name first,	if individual):	Jaeger, Raymond			
Business or Residence Add 10004	ress (Number and	Street, City, State, Zip Code	e): c/o Aristos Capital,	LLC, c/o Pilosoft,	Inc., 55 Broad Street, New York, NY
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual):	Jagai, Lloyd			
Business or Residence Add 10004	ress (Number and	Street, City, State, Zip Code	e): c/o Aristos Capital,	LLC, c/o Pilosoft,	Inc., 55 Broad Street, New York, NY
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual):	Murugesu, Vijayabala	n		
Business or Residence Add 10004	ress (Number and	Street, City, State, Zip Code	e): c/o Aristos Capital,	LLC, c/o Pilosoft,	inc., 55 Broad Street, New York, NY
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual):	Burton, Evan			
Business or Residence Add 10004	ress (Number and	Street, City, State, Zip Code	e): c/o Aristos Capital,	LLC, c/o Pilosoft,	Inc., 55 Broad Street, New York, NY

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

						В.	NFORM	IATION	ABOUT	OFFER	ING			
1.	Has the	e issuel	sold, or c	loes the is	suer inten	d to sell, to						•••••	☐ Yes	⊠ No
						Answer a	ilso in App	endix, Co	iumn z, ir i	lling under	ULUE.			
2.	What is	the mi	inimum in	vestment t	hat will be	accepted	from any i	ndividual?				*********	\$1,	000,000 (may be waived)
3.	Does th	ne offer	ing permit	joint own	ership of a	single uni	1?						⊠ Yes	□ No
4.	any cor offering and/or	nmission j. If a p with a s	on or simil person to b state or sta	ar remune be listed is ates, list th	ration for s an associ e name of	son who h solicitation ated perso the broke er, you ma	of purcha: in or agent r or dealer	sers in cor t of a broke t. If more t	nnection w er or deale han five (5	ith sales o ir registere 5) persons	f securities d with the to be liste	s in the SEC d are		
Full	Name (l	.ast na	me first, if	individual;) N/A	L								
Bus	iness or	Reside	ence Addre	ess (Numb	er and Str	eet, City, S	State, Zip (Code)						
Nan	ne of Ass	sociate	d Broker o	or Dealer										
Stat						tends to Ses)								☐ All States
	•					(CO)						[HI]	[ID]	☐ All States
□ (] [IN]	□ [IA]	□ [KS]	□ [KY]	□ (LA)	☐ [ME]	☐ [MD]	☐ [MA]	☐ [MI]	☐ [MN]	☐ [MS]	□ [MO]	
	мтј 🗀] [NE]	□ [NV]	□ [NH]	□ [NJ]	□ [NM]	□ [NY]	□ [NC]	□ [ND]	□ [OH]	□ [OK]	□ [OR]	□ [PA]	
	RI] 🗀] [SC]	□ [SD]		□ [TX]	[[[□ (VA)	[WA]	[M∧]	[WI]	[WY]	□ [PR]	
Full	Name (l	_ast na	me first, if	individual)									
Bus	iness or	Reside	nce Addre	ess (Numb	er and Str	eet, City, S	State, Zip (Code)						
Nan	ne of Ass	sociate	d Broker o	or Dealer										
Stat						tends to Ses)								☐ All States
		_	☐ [AZ]			☐ [CO]					☐ [GA]	☐ (HI)	☐ [ID]	
	IL) 📮] [IN]	[IA]	☐ [KS]	□ [KY]	[LA]	[ME]	[MD]	☐ [MA]	[MI]	☐ [MN]	☐ [MS]	[MO]	
	MT] 🗖	[NE]			□ [NJ]	□ [NM]	□ [NY]	☐ [NC]		□ [OH]	□ [OK]	□ [OR]	□ [PA]	
	RI] 🗆] (SC)		[NT]	□ (TX)			□ [VA]	□ [WA]	[M∧]	□ [Wi]	□ (WY)	□ (PR)	
Full	Name (L	_ast na	me first, if	individual))									
Bus	iness or	Reside	nce Addre	ess (Numb	er and Str	eet, City, S	State, Zip (Code)						
Nan	ne of Ass	sociate	d Broker o	r Dealer	·		·							
Stat						tends to Ses)								☐ All States
						[CO]						[HI]	□ [ID]	
		[IN]	[IA]			[LA]					_	☐ [MS]	[MO]	
	MT) 🗆	[NE]	[NV]	□ [NH]	□ [NJ]	[NM]	[NY]	☐ [NC]	□ [ND]	□ [OH]	□ [OK]	☐ [OR]	□ [PA]	
П	RD □	rsci	□ıspı	□ ITNI	Ппхі	□ rum	П≀л	[] (VA)	□ IWA1		(IVI)	□ IWYI	□ (PR)	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box ☐ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Aiready Offering Price Sold Type of Security Debt \$ Equity\$ \$ ☐ Preferred ☐ Common Voting, Redeemable shares)\$ 100,000,000 19,949,878 \$ Other (Specify) ___ 100,000,000 \$ 19,949,878 Total Answer also in Appendix, Column 3, if filing under ULOE Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate **Dollar Amount** Number of Purchases Investors Accredited Investors 19,949,878 \$ Non-accredited Investors 0 0 \$ Answer also in Appendix, Column 4, if filing under ULOE If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Types of **Dollar Amount** Type of Offering Security Sold Rule 505.... \$ Regulation A..... N/A Rule 504 N/A N/A Total Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees 0 Printing and Engraving Costs 20,991 Legal Fees Accounting Fees.... Engineering Fees 0 Sales Commissions (specify finders' fees separately).....)...... 0 Other Expenses (identify)

Total

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

20,991

	C. OFFERING PRICE, NUMBER OF INVESTORS, EX	PENSES /	AND USE	OF PRO	CEEDS	3
4	b. Enter the difference between the aggregate offering price given in response to Part Question 1 and total expenses furnished in response to Part C—Question 4.a. This diffe "adjusted gross proceeds to the issuer."	rence is the			<u>\$</u>	99,979,009
5	Indicate below the amount of the adjusted gross proceeds to the issuer used or propose used for each of the purposes shown. If the amount for any purpose is not known, furnitiestimate and check the box to the left of the estimate. The total of the payments listed the adjusted gross proceeds to the issuer set forth in response to Part C – Question 4.b	ed to be ish an must equal	Óffi Direc	ents to cers, ctors & liates		Payments to Others
	Salaries and fees		\$			\$
	Purchase of real estate		\$			\$
	Purchase, rental or leasing and installation of machinery and equipment		\$			\$
	Construction or leasing of plant buildings and facilities		\$			\$
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issupersuant to a merger.	uer	\$			s
	Repayment of indebtedness		•			\$
	Working capital		\$		_ 🖂	.,
	Other (specify):		\$			\$99,979,009 \$
			\$			\$
	Column Totals		•		_ 🖂	\$99,979,009
	Total payments Listed (column totals added)	ليا	Ψ		- ⊠ 19.979	
					9,9/9	, 009
	D. FEDERAL SIGNAT					
CO	is issuer has duly caused this notice to be signed by the undersigned duly authorized per nstitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Con the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.	rson. If this r nmission, up	otice is filed on written red	under Rule quest of its	505, the staff, the	following signature information furnished
	suer (Print or Type) Signature	$\overline{\cap}$		D	ate	
	istos Capital Offshore Fund Ltd.	<u> </u>			0ct	ober 17,2007
	time of Signer (Print or Type) Title of Signer (Print or Type) Authorized Person	Û				
	ATTENTION					
	Intentional misstatements or omissions of fact constitute federa	l criminal vi	olations (S	Pe 18 II S f	2 1001 \	

1.	Is any party described in 17 CFR 230.262 present provisions of such rule?	ity subject to any of the disqualification	☐ Yes ⊠ No
	See App	pendix, Column 5, for state response.	
2.	The undersigned issuer hereby undertakes to fur (17 CFR 239.500) at such times as required by s	nish to any state administrator of any state in which thi tate law.	s notice is filed a notice on Form D
3 .	The undersigned issuer hereby undertakes to fur	nish to the state administrators, upon written request, i	nformation furnished by the issuer to offerees.
4.	The undersigned issuer represents that the issue Exemption (ULOE) of the state in which this notic of establishing that these conditions have been s	or is familiar with the conditions that must be satisfied to be is filed and understands that the issuer claiming the atisfied.	be entitled to the Uniform limited Offering availability of this exemption has the burden
	suer has read this notification and knows the content ized person.	is to be true and has duly caused this notice to be sign	ed on its behalf by the undersigned duly
	(Print or Type) s Capital Offshore Fund Ltd.	Signature Landha	Date October 17,2007
Name Lloyd	of Signer (Print or Type) Jagai	Title of Signer (Print or Type) Authorized Person	

E. STATE SIGNATURE

Instruction

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				APF	PENDIX				
1	2	2	3			4		5	;
	Intend to sell to non-accredited investors in State (Part B – Item 1)		Type of security and aggregate offering price offered in state (Part C – Item 1)		Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E – Item 1)				
State	Yes	No	Voting, Redeemable Shares	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA									
СО									
СТ									
DE									
DC									
FL						· •			
GA									
н									
ID									-
IL									
IN									
IA									
KS									
KY									
LA	·	х	\$100,000,000	3	\$625,000	0	\$0		х
ME									
MD									
MA		Х	\$100,000,000	1	\$1,150,000	0	\$0		х
MI									
MN									
MS									
MO									
MT									
NE									
NV									
NH									
Ŋ		Х	\$100,000,000	1	\$450,000	0	\$0		Х
NM									

				API	PENDIX						
1	1 2 3 4										
	to non-a investors	I to sell ccredited s in State – Item 1)	Type of security and aggregate offering price offered in state (Part C – Item 1)		Type of investor and Amount purchased in State (Part C – Item 2)						
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
NY		х	\$100,000,000	2	\$224,878	0	\$0		х		
NC											
ND											
ОН											
ОК	-										
OR											
PA											
RI											
sc											
SD											
TN											
TX											
UT											
VT	ļ										
VA								ļ			
WA											
wv											
WI											
WY			·								
Non US		x	\$100,000,000	2	\$17,500,000	o	\$0		х		

